CHANGE IN OWNERSHIP STATEMENT OIL AND GAS PROPERTY

File this statement by:



Matthew R. Maynard Placer County Assessor 2980 Richardson Dr Auburn CA 95603 Phone: 530-889-4300 Fax: 530-889-4305 assessor@placer.ca.gov

BUYER/TRANSFEREE		RECORDING	RECORDING DATA		
		Date Recorded:			
MAILING ADDRESS		Document Number:			
	TRANSFEROR	Assessor's Identification Numb	er:		
SELLER/	TRANSFEROR	MB F	PG PCL		
MAILING	ADDRESS	Phone Numbers:	,		
FIELD	LEASE	Buyer: () Seller: Sec: Twp:	Rng:		
The lay	ORTANT NOTICE w requires any transferee acquiring an interest in real proper	ty or manufactured home subject to local prope	erty taxation, and that is		
Statem	ed by the county as <mark>se</mark> ssor, to <mark> fi</mark> le a Change in <mark>Ow</mark> nership Stat ent must be filed at the time of recording or, if the transfer is no nere the change in ownership has occurred by reason of deatl	ot recorded, within 90 days of the date of the char	nge in ownership, except		
	ate is probated, shall be filed at the time the inventory and app				
	s from the date of a written request by the Assessor results in opplicable to the new base year value reflecting the change in or				
but not	t to exceed five thousand dollars (\$5,000) if the property is elig	ible for the homeowners' exemption or twenty th	ousand dollars (\$20,000)		
	property is not eligible for the homeowners' exemption if that fa d shall be collected like any other delinquent property taxes, and				
	RANSFER INFORMATION (Check the appropriate boxes to inc				
1. 🗌	Purchase (complete Sections B and C on the reverse side).	13. Was this transfer/addition solely between sp	ouses		
<u>م</u> ۲		or registered domestic partners, divorce sett	lement, 🗌 Yes 🗌 No		
2.	Land Sales Contract. A contract for the purchase of property in which the seller retains legal title to it after the buyer takes	etc.?			
	possession.	14. Was this transaction only a correction of the			
3.	Inheritance. Transfer by will or intestate succession.	name(s) of persons or entities holding title?	🗌 Yes 🛄 No		
Ј. Ц	Date of death	15. If you hold title to this property as a joint tena	ant,		
	Relationship to deceased	is the seller or transferor also a joint tenant?	🗌 Yes 🛄 No		
4.	Trade or exchange. The above described property has been traded or exchanged for other real property or tangible personal	16. Was this transaction the termination of a join tenancy interest?	t 🗌 Yes 🗌 No		
	property.	17. Was this transfer between family members c	ır		

- 5. Merger or stock acquisition.
- 6. Derived Partial interest transfer. Was less than 100 percent of the property transferred? If yes, indicate the percentage transferred ______%.
- 7. Foreclosure or trustee sale.
- 8. Gift.
- 9. Life estate.
- 10. Reconveyance (pay-off).

12. Termination of a lease:

11. Creation or assignment of a lease:

(data)	

(date)

Yes No document? 19. Was this document recorded to create, assign, Yes No or terminate a lender's interest in this property? 🗌 Yes 🗌 No 20. Has this property been transferred to a trust? If **yes**, is the trust: Revocable Irrevocable 21. If the trust is irrevocable, is the transferor or the 🗌 Yes 🗌 No transferor's spouse or registered domestic partner the sole present beneficiary? 22. Does this property revert to the transferor in 🗌 Yes 🗌 No 12 years or less? (Clifford Trust)

18. Was this document recorded to substitute a trustee

under a deed of trust, mortgage, or other similar

related businesses?

🗌 Yes 🗌 No

If you answered no to 21 or 22, attach a copy of the trust agreement.

THIS DOCUMENT IS NOT SUBJECT TO PUBLIC INSPECTION

EF-502-G-R06-0516-31000154-2 BOE-502-G (P2) REV. 6 (05-16)

B. **PROPERTY INFORMATION** (Complete each item as it applies to this transaction.)

1.	Seller's name and address:							
2.	Field name: Lease n	Lease name: Parcel number:						
3.	Date sales agreement or letter of intent signed:	ate sales agreement or letter of intent signed: Effective						
4.	Closing date: Re	ecording document: Number:	per: Date:					
5.	Name, address and phone number of person with purchasing firm who is familiar with the transaction and would be available to answer questions relative to the transaction:							
6.	Name, address, and phone number of any consultants used in connection with the transaction:							
7.	Interest acquired (please report decimal fractions out of to	st acquired (please report decimal fractions out of total; e.g., 0.875 out of 1.000).						
	Revenue interest: Working interest: Other working in		working interest owners & per	nterest owners & percentages:				
8.	Number of wells: Producing Inje	ction	All idle	Other				
9.	Productive acres in the parcel:	Total ad	cres in the parcel:					
10.	Production rates at acquisition: Oil		mcf/d Water					
	Price received for oil and gas at acquisition: Oil		_\$/b_Gas	\$/mcf				
	Oil gravity: API Gas:			ft				
13.	Proved reserves: Developed: Oil							
	Undeveloped: Oil		bbl Gas	mcf				
14.	Were appraisals, evaluations, cash flow projections or oth	ner analyses made to assist i	n e <mark>sta</mark> blishing a purchase pric	e? 🗌 Yes 🗌 No				
15.	 a. If yes, please enclose copies of those appraisals, evaluations, cash flow projections or analyses. Please identify the analysis or appraisal most relied upon in establishing the purchase price. b. If no, please explain in Section D how the purchase price was determined. Please enclose a copy of the following: a. The sales agreement or contract including all exhibits and amendments thereto, as well as other related agreements or contracts, such as loan agreements. b. A complete listing of all assets acquired and liabilities assumed in the acquisition, if not included in item 15a. Please list each lease, including wells and related equipment, separately. c. The allocation to your company books of the total acquisition price, by specific items. 							
C.	PURCHASE PRICE OR TRANSFER AMOUNT INFORM							
	Terms: Total purchase price:	Ca	ish to seller:					
	Production and/or conventional loan(s):	Amount(s):		Interest rate(s):				
	Source(s) of financing (bank, seller, etc.):							
D.	urchase price allocated to: Fixed plant & equipment: Moveable equipment EMARKS (Please include below any additional information about the sale or transfer which should be called to the attention of the Assessor.)							
		CERTIFICATION						
Par	OWNERSHIP TYPE I certify (or declare) under penalty prietorship including any accompanying state poration declaration is binding on each accompanying state	ments or documents, is true, c	orrect and complete to the best					
	E OF ASSESSEE OR AUTHORIZED AGENT (typed or printed)		TITLE					
SIGN	JATURE OF ASSESSEE OR AUTHORIZED AGENT		DATE					
NAM	E OF ENTITY (typed or printed)	FEDERAL EMF	PLOYER ID NUMBER					
PRE	PARER'S NAME AND ADDRESS (typed or printed)		TITLE					
DAY	TIME TELEPHONE NUMBER E-MAIL ADDRESS							



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